



C O U R S E

O F

L E C T U R E S

U P O N

M I D W I F E R Y,

W H E R E I N

The T H E O R Y and P R A C T I C E of that A R T
are explain'd in the Clearest Manner.

M O R E P A R T I C U L A R L Y,

The Structure of the *Pelvis* and *Uterus*.

Of the *Fætus* in *Utero*, and after Parturition.

The Management of Child-bearing Women, during
Pregnancy, in Time of Labour, and after Delivery.

The Manner of Delivering Women, in all the Variety of
natural, difficult, and preternatural Labours, perform'd
on different Machines made in Imitation of real Wo-
men and Children.

By th M^r. S M E L L I E.

396

Printed in the Y E A R M D C C X L I I.

July 24 1773
my Lectures & Labour
CONDITIONS.
W. Smellie

THAT MIDWIFERY may be taught to the best Advantage, and become of more general Use to People of all Degrees, the following Conditions are proposed to those who desire to learn, or be farther instructed in the Knowledge of that Art.

I. The Course is divided into Twelve Lectures, and no more than four Persons can attend at once, each paying Two Guineas at the First Lecture.

II. They who come on purpose from the Country, and cannot wait 'till the Number of Subscribers is complete, pay Three Guineas.

III. The Expence of being present at a real Labour, is One Guinea; but such as contract for Two Courses and Four Labours, pay only Five Guineas, and perform the last Delivery themselves.

IV. Pupils who engage for a Year pay Fifteen Guineas, and are intitled to attend all the Courses and Labours of that Time, whereby they will have the Opportunity of Seeing and Performing in several difficult Cases.

V. By paying Twenty Guineas they are admitted to this Course, with all the forementioned Advantages, for Two Years.

N. B. The Men and Women are taught at different Hours.

H E A D S

400096

De Graaf
Morgagnius 1707
Molphtigius
Ruyssch—
Simpson
Mauriceau
Dionis
Lemotus
Chamberlen
Dewenter
Giffard
Chapman
Mowbury
Brechtin
Lawkes
Ould
Jo^{no} Schenckii
Hiermanii Fabricii ab aque Pendente
Nith: Fulpius
Laur: Huister 1739
Hermanius Boerhaave
A. Corn: Leljus



July 24 1743 Recd. of Mr Pearson in full for attending

H E A D S

my Lectures and Labours of me W^m Smellie

Of the several

L E C T U R E S

Contain'd in this C O U R S E.

L E C T U R E I.



F the several Authors that have written on MIDWIFERY, and the different Improvements that have been made in it from time to time.

A Description of the Bones of the *Pelvis*, viz. the *Os sacrum*, *Coccyx*, *Ossa inominata* divided into three Bones, *Ilium*, *Ischium* and *Pubis*; the Connexion of the Bones, and Form of the *Pelvis*.

The Shape, Dimensions, and Situation of these Bones, demonstrated by proper Machines.

Of a distorted *Pelvis*, with several useful Remarks.

The Difference betwixt a Male and Female Skeleton.

LECTURE II.

By wet and dry Preparations, and other artificial Contrivances, plac'd in different Machines, are shewn the following Parts.

The *Vagina*, with its Connexion to the *Uterus*, and outward Parts.

The *Meatus Urinarius*, and Bladder.

The *Anus*, *Rectum*, and Situation of the Intestines and other *Viscera* in the *Abdomen*.

The Situation, Bulk, and Form of the *Uterus*, before and at different Times of Pregnancy.

The *Os Tincae*, Neck, internal Orifice of the Neck, and *Fundus Uteri*.

The *Fallopian Tubes*, *Ovaria*, the broad and round Ligaments, their different Connexions to the Womb, amongst themselves, and to the neighbouring Parts.

The Increase of the *Ovum*, and *Fundus Uteri*, after Conception.

The gradual Opening of the Orifice, and the Stretching of the Neck of the Womb.

The Bigness, Weight, and Names of the *Ovum* and Child, at different Periods of *uterine* Gestation.

Of Abortions, *Molas*, and false Conceptions.

Of the *Placenta*, *Funis Umbilicalis*, the *Chorion* and *Amnios*, their Connection, Structure, and Use.

LECTURE III.

The Method of Touching before and after Pregnancy, both on the Machines, and Women, at their different Times of being with Child.

The Touching in time of Labour, the gradual Opening of the *Os Tincae*, the Forming of the Membranes and Waters.

The

The Lectures of Mr W. ^{W. M.} Snellie as begins
in from of Syllabus June 26 1740

The Bones of Pelvis are divided into Os Sacrum,
Coccygis and Innomiatum w^{ch} last in a fetus
are divided into 3 more Illium Ischium, and
Pubis, Some say these Bones separate a little
in times of Labour, but I have try'd to find
apertures in vein so am inclin'd to think to the
contrary. —

Os a Pubis are join'd by a Ligament?

Wth a Woman sits in a declining Posture of mouth of
Pelvis from of Abdomen is horizontal, & that a
declining posture is best wth Child is not in of
Pelvis

As to Position be betwixt of French and London
w^{ch} is as you Cut for of Stone (w^{ch} posture is the best
to be sure wth Child wants turning or you use an
Instrument) is to be laid on of left Side wth Per Per

Position
For you In Germany they have a Similiaculor seat
Sometimes let them walk as our design

Size of y^e
Pelvis -

It sh^d be of an Oval like form from Illium
to Illium, at y^e Brim of y^e Pelvis it sh^d
be 5 Inch: 2. from Pubis to y^e Spine it sh^d be 4 1/2
crop. 5 I. deep behind. and 2 I. down y^e Divide
of y^e Pubis. neither of Distorted Pelvis only
2 I. 2 to y^e Sacrum y^e Pubis is: never could be
delivered of a Live Child.

Lect: 2nd June 10th 1743

He shew'd us by a Natural Uterus and with all
its parts its Structure w^{ch} he kept in sp^{ts}
w^{ch} had two skatom above swelling of it h^{ad} been

3 months
Indur size

Size of y^e Size of a Gooses Egg.

no Durgen^t
by tooth being
fill 5th mth.

No Judging whether all: be wth the Child or not
before 5 months and for y^e Child is not large enough
to distend y^e Uterus above y^e Pubis nor is y^e
internal orifice of y^e Womb dilated sufficiently. -

The Womb may keep it thick wth till very nigh
y^e last because of number of y^e Contorted vessels
that are Distended by a Superabundancy of Humours

Size of y^e foot
wth it drops
down

Size of y^e Size of a Ministers Dress wth Drops from
y^e Ovary to y^e Lunus Uteri.

W^h Fetus

Is called an Embryo till of 3^d month and
a Fetus after that. —

Sup^r & Retⁿ
tion

No Superfotation because of Mucus that
naturally flows after Conception closes up of
neck of Womb and hinders of Injection of Semen

Conception

W^h of Semen is ejected into of Fundus Uteri is conveyed
to of Ovary by of Fallopian Tubes and there it
impregnates of Women's Ovary w^{ch} are always in
young W^h but for want of being impregnated
by of male they fall off and so dissolve away
as for instance of Dulcis Egg which his bread as
we say by of Cock will never receive any vis vitæ
if Yolk is of Yellows and of White is of Nutrition
so by of Warmth that of hen gives in hatching his
vis vitæ of moist white that is of Yellows and so of Chick
vis and of hen picks of shell open &c. —

Compare
to Yellows
Egg

its receiving
vis vitæ

But after of Egg from of Ovary is settled in of Fundus
Uteri it causes an adhesion and so of fetus there.
Some say this going after his impregnated 19 days
it receives of vis vitæ. —

No moles

No moles or false Conceptions as thought by of
Ancients for it is in the Womb must be nourished
they are only Coagulated Blood or Hematomata
or Bullings &c. — or Enlarged Glands w^{ch} may
Drop off. —

The American
of the Ovary The Ovary at 1st weighs 2^{oz} at 7 days and is
19^g. at 30 days 9^g 22 at 6 months 30^g. 112 -
By these Papers annexed shows a gradual
opening of the Ovary and of stretching of
of uterus and internal orifice of neck of
of womb at 1-3-5-9 months and -
The Ovary in 1st month appears all over vascular
except at 1st orifice where tis little membranous

Lect: 3rd

Touching At 5 months and you'll find a Judgement: the
Belly protruding and not quite by pressure to
of Back. The Child struggles at 4th month.
Sometimes at 7th time of Delivery by pressure of Ovary is turned to
at 7 months You'll feel a hard w: at that time tis supposed to
and is right turn is right, if tis not w: the head downwards? If
of Funis has got twisted round of head or nuchal
then I hope you'll feel of Bruch &c.

What sent for
to call? Touch of Ovary and if not dilated and you
Shew w: dont find of Shew w: are bloody ash with the
of Ovary or Stone If it presses of Colon and is a Colic give a Rister
w: will doe great service to help Delivery
If true Give true if of membranes and Waters approach
pains and of Ovary gradually dilated to the End not

to break if membranes unless sufficient dilatation. —

False
Pains

If y^e Pains be false gives an epist^e and
bleed if Methuine &c.

Vomiting
and by
Bleeding

If vomiting happen bleed with? before
after Conception a Methuine proceeds from a
too great distention of y^e Vessels & affects y^e
Stomach from Convent of parts

Dribbling
of y^e Water

Sometimes dribbling of y^e Waters happen w:
hinder y^e Delivery is occasioned by anxiety and
weakness in order to assist give an epist^e
pretty strong w^{ch} remove y^e Pains awhile and
give strength against y^e next pains come on
and hinder y^e Dribbling, if y^e Sleep will
continue 6 or 8 hours. — — — — —

Lingering
Labour
prevents

Sometimes if y^e Time is out for
and you'll think it's not wanted you turn round
your finger as Mr Smellie was once said.

Surprise

Surprises sometimes bring on too sudden Labour

Membranes
Breaking

Sometimes they break and no signs of Delivery
as y^e W. in St. James has broken abt 2 in y^e morning
and was not delivered till 8 in y^e same morning —
w^{ch} at 2 before we gave her a L: 2: 9: 30

Cautionst not to touch wth of Pain is on lest you burst
of membranes unless it os Time be Dilated.

2nd enough. —

Wth you break it before again

Lect: 4th

Situation in of Uterus is different if tis right
tis wth its face to f^{or} Sacrum or Puggis —
But you are to judge according to the Posture

Situs by of
Touching

If the Head presents you'll feel of Sutures as for
instance if right wth its face down: you'll feel
of Sagittal Suture cross of Coronal down and note
of Frontal, but if its face up: you'll feel of
Sagittal Suture make no Cross over of
Lambdoidal.

Kneels
presenting

you'll touch of Buttocks hard on each Side and
of Anus and of other way of private parts. —

Shoulders

you'll find a hollow betwixt of Scapula and
further of Arm Pits and Spine. —

If there is no sign tis either betwixt of Legs
or both Buttocks. or Shoulders. or Spine or
Sutures

Hands
from
feet

Knees
from
Elbows

Hands differ from feet by details

by of cleavage and its sharpness from of
Smoothness of of knees. —

Lect: 5th —

Labour
pains how
are brought
on

Some W^m think ^{pains} ~~they~~ are to be brought on in
his ear Interest to tell in so at some time give
some Cordial to put off time till you have their
Strength recovers their nature and not you will
bring on ~~quick pains~~ —

at every
throw

Opist^h (wth anointing of parts always) wth your
fingers to dilate of Dices off of as time at
every throw just before it begins

Medicine
or Cordial

of Sol: col: ol: and all Stimuli as Snuff &c. —
Volatile Sprts. Troch: de myrrh: Cast. Coc: Histius
Cordials warming things but on of Contrary of the be
favourish and hot no Stimuli but Diluters. —

Placenta
Delivered

Novel thing
how long
it last

after of Child is brought away you are to tell
for of Placenta only Cut of string abt 2 Inch from
of Child and lay it on one side and give it to of
nurse then lap of Child round of first Eng.

of y^r left hand and follow gently wth y^r right hand and draw it away.

Placenta
adhering

If s. follow up wth y^r right hand and loosen round wth y^r fingers till you geth^r all into y^r hands — and leave none least a violent flooring. — but if some be left and no violent flooring let some of it stay if it extraction be painfull.. it will digest away. —

If y^e internal Orifice of y^e uterus be contracted you are to open it if a violent flooring be. — applying y^r both hands on y^e Belly to push down y^e uterus that it may not fly y^r ^{own}.

Managem^t. of Child before Delivery give y^e Child: Sweet: in y^e Amⁿ ^{or y^e Child} before and after Delivery All Cakes very warm beware of cold. Knead up y^e Abdomen for y^e same reason as in y^e Dropsy

Flooding.

After Delivery lie on y^e Left and nothing left in y^e uterus give R^h Vitr: ripe Steam: rap: sang: Dracon: &c: lie in Die

R^h Tot: Fresh: Full: V. S. pro re nata Elseby be careful of least a troublesome Diarrhea follow some Apply to y^e Belly to recover y^e tone Temp: Galb:

and the

Abstract;

P.S. pro re nata

Swells

Repellents may be used if there is no fever such as Diach.

Emollant should be used if there is any fever such as
Tot: Emoll: Catapl: Emoll:

Infant is either washed with little milk warm water
and either Symplicabb: or pulv: Symplic: 5i-
pro re nata or R: 3℥ — to omit up if it is
called Meconium.

Milk By nature it seems to be ordered a proper Dis-
sti. for it will purge as really it ought. —
for we see all animals take it in. —

Aptha R/ol: Amigd: d: mil. roser. p: o: —

Gums
or Teeth
Cutting not to be Done till they protuberate —

Miscarriage
if before
6th month
not to Deliver till 6th month supposing a
floating though if violent Abortion may be
done at 5th month. —

Protrusion
Uteri is when if Fundus is down and entirely in our
View —

Prolap-
sis Is not if os Tinea and neck is fallen down

Cure Balsamic Astring^t but nothing safer than
Child bearing & keeps em up —

Lect: 6th

W^house
of Torups
Fillet or

The Torups are used w^h the Child is come
down into y^e Pelvis either w^h y^e face up or down
hand - or sideways it consist of 4 parts and push by
degrees w^h fingers up & draw to Dilate y^e Os
then fix w^h y^e fingers of male Torups over y^e
for always thin of female and draw from side
to side w^h points toward y^e navel end of hands
low of Cuyers y^e belly perpendicular. —

For —

Sideway, always fix y^e Torups on each side of y^e Temple
or Bone better so in this position draw up and
downwards. —

Crochet
used

w^h y^e head stuck put y^e Crochet under y^e Chin

W^h you turn y^e Child or use the above Instr^t set
y^e W^h sh^d Edge of y^e Head as to be cut for y^e Stone her
times supported by 2 W^h and her head there
by one more. —

Fillet

Quinto Rejiter

Lect 7th Labours Proternatural

Crown or
Back part
off it.

If these sh^d present wait for strong pain
if not use of forceps —

Breach

If you can't push it up bring it forward wth if
legs to y^e belly and wth it is half come out if it
is wth its face up^{on} turn it once round and ag^{ain}.
wth to turn one round and ag^{ain} — will make one turn round for y^e head. —

then draw down y^e arms if they will not come with
y^e head. but before you turn as above bring
out y^e legs wth will bend wth their hump backs
being young. — then draw on one side ^{of back} of other
and put y^e finger into y^e mouth, which is natural —

Lect. 8

Two
Circumstances
of
immediate
Delivery
1st

There are wth you must Deliver that is wth violent
flooding 2nd on ill posture

always in these floodings y^e Child is not immediately
Delivered because y^e Placenta is loose.

In order to relieve push in y^e fingers then y^e
whole hand up to y^e elbow or to y^e Tander
is y^e rule. So if y^e membranes are not broke
then do it and bring y^e Child by y^e feet at y^e same
time. —

The Side-Openings of the Os Uteri.
 Several Cautions and Remarks. *which by Pains be true, and should
 curious Instructions when Labour*

LECTURE IV. *is suspected.*

Of the Child's Situation in the Womb during the different Times of Pregnancy.

To know by the Touch, both before and after the Membranes are broke, what Part of the Child's Head presents to the Os *Tinæ*: Whether the Face is turn'd to the Mother's Back, Belly, or Side; also when the Face, Ear, or Forehead presents.

The Touches of the Shoulder, Back, Belly, Knees, Breech, Elbows, Hands and Feet.

LECTURE V.

The Method of managing Women during their being with Child, and also in time of Labour.

To know the false from the true Pains, and how to carry off the First, and bring on the Last.

Each Pupil on a Machine delivers a Child coming in the natural Way, inclosed in the *Uterus*, and surrounded with its Membranes and Waters.

The Method of tying the Navel-String, after which they bring the *Placenta*, either as it is more or less difficult to fetch, by its being loose, or adhering, or close kept by the Contractions of the *Fundus Uteri*.

The Way of ordering a lying-in Woman and Child after the Delivery. *and w^ho deliver w^h upon a miscarriage -*

LECTURE VI.

The Method of Assisting with the Hand, Forceps, or Fillet, when the Child's Head, though it presents fair, sticks too long in the Passage; occasioned either from the
 Rigidity

Rigidity of the external Parts, or from the Danger that both Mother and Child may be in from a violent Flooding, real Weakness, or other Accidents that carry off the necessary Pains.

LECTURE VII.

The Division of Preternatural Labours into three different Classes.

The First: How to deliver a Child when the Feet or *Anus* presents, with the Child's Face turn'd towards the Mother's Back, Belly, or Side.

Some new and curious Remarks on these Deliveries, found out by seeing the Inside of the *Uterus* in time of these Operations.

LECTURE VIII.

The Second Class of Preternatural Labours: How to deliver a Child before the Membranes are broke; there being an absolute Necessity to perform that Operation as soon as possible, from the following Circumstances;

A violent Flooding coming suddenly;

From being certain that the Child is not right turn'd.

Some Remarks and Histories. *as knowing if right hand from left*

LECTURE IX.

The Third: How to deliver a Child after the Membranes are broke, and the Waters all gone.

When the Head does not present fair.

When the Child lies across, but presents with the Foreparts to the *Os Tincæ*, Mother's Back, or Side.

The Feet, Hands, or Navel-String presenting.

LECTURE

Let the
right
hand be
left

If you lay your hand upon a Childs head
and it be in of some position and your thumb
be upon its side of contrary to your intention
entire

Lectth 9

Waters
gone

Supposing if Waters gone if Childs head not
fair, strike on of or Dabie or Eyes too high
for if forceps be of best practice to turn
it wth r hand and arm up and deliver
it by of feet.

Lectth 10

As tis in Difficult Cases of practice to
Deliver by of feet. So wth tis in such bad

Noose
is too high

postures that you cant easily deliver or
turn it use of noose w^{ch} is of better or Sepe
in which postures as follows.

The Sides
w^{ch} the
is the

Suppose if Childs Back is toward y^e os
Tines or mothers Back either up or down
or across of uterine w^{ch} you fully of Touch
if at y^e some time a hand should come down
you need not push it up for in turning it will
draw up pres y^e hand in order to feel find just
indeed our to find both if not easily come at
find one pull it and it dont easily come out
or Child turn you bring that leg down as low
as possible and fix your noose and push if
Child is there hand as you draw by y^e Ligature
it y^e some time, so by that means it will turn
then seek for y^e other foot if not easily find
yet bring that as far as you can easily. -
suppose to y^e breech then you'll find y^e
other w^{ch} draw out.

W^h you use and pull by y^e noose remember
always to turn y^e Child ^{round} ~~ex~~ that side your
noose is fixd or toward it, pushing at y^e
some time a little up.

Lect: 11th —

What is a
Monster

It is w^h one Ovary is impregnated
wth 2 Embrios and they ad here in Utero

Hydrocephalus —

It is properly a distended head in
which you are to open if head and
forale wth of Sutures and open if Bone
to Dilate if Orifice, then squeeze out
if Brain wth of Crutchet and fix it for
extraction in if ear Orbit or os Sphenoid
and introduce if finger on one side while
you draw wth of Crutchet

Cerebral
operation

Is never practised but in a Distorted Skull
and w^h it wont admit of hands. 2 Instances
have been where it succeeded.

Twins
not to be

is formed on either side of the neck where tapping is
not to be

Portals

There is no fortelling for they form a
round as one, as may be compared to a wine
kernel in one shell they have 2 flat sides
but cut by more round —

one
Placenta they have thought
very
soon
it has been known 2

2 —
They generally come one after the other
So if 2nd is to be brought by of feet with
your hands unless you wait for fresh
pains. — —

Lect: 12th

Signs
of Dead
Child are

Fetid Smells, purulent matter of falling
off of Child from one side to another like a
bump of Lead as if mother turns, no Puls-
ing of Cord nor warmth in its mouth &c.

After left
Behind

If Delivery has been so bad as to leave
of head behind you are to introduce your
Fingers under of Chin and your other
hand thumb in its mouth and fingers and
its jaw to extract. — —

Net This is turn'd over if head as if it's over a
stump but this is rejected because the
head sometimes turns round and won't
come out off its page.

Finis

Memorandum when you are sent
for before you proceed. —

Imp^d Send into y^e Room to acquaint y^e Patient
wth y^e coming in. lest she be too much surpris'd. —

2^{dly} Call y^e Midwife to advise and ask how long she
has been pregnant, and how she was taken ill, & at first
how y^e pains proceeded, ^{whether y^e Child} how y^e Child lies, and wth she has
pulls at w^{ch} ^{most} is important to you to ask that you
on o^y not be blam'd, if y^e Delivery should not succeed well
whether y^e Waters have trickled or not, w^{ch} would hinder
Delivery, whether she has had a Child before born alive
whether it be now alive. How long in Labour.
Whether old. Whether y^e Cervix be Dilat'd.



Memento R Domachum L.L.

R Sal: vol: ol: 3/4.

R Pulap: (ars: 3/4) in confut: alchemi.

R Sp: L.L. 3/4.

Forcup, Cophet, Suthers.
in this syllabus 2th it explanation











LECTURE X.

The Delivery when the Back of the Child is turn'd towards the *Os Tincæ* or Mother's Back, either lying up and down, or cross the *Uterus*.

When the Face presents with the Chin turn'd towards the *Os Pubis*, *Ischium*, or *Coccyx*.

The Method of Assisting with a Noose in those difficult Cases.

The Management of both Mother and Child after such severe Deliveries.

LECTURE XI.

The delivering Twins, whether they come right or wrong, and the fetching their *Placentas*.

Of Monsters, with the Methods of delivering them, according to their different Adhesions or Bulk.

When the Head is too large to pass the *Pelvis*, or when the *Pelvis* is distorted and too narrow.

Of the *Cæsarean* Operation.

LECTURE XII.

The Signs of a Child's being dead when in the *Uterus*.

How to deliver the Head, when separated from the Body, and left in the Womb; either with the Net, Hand, or Crotchet.

A Recapitulation of the Heads of the former Lectures.



AN EXPLICATION of the

TERMS of ART

Used in this SYLLABUS.

A *Abdomen*, The Belly.

Abortion, A Miscarriage.

Amnios, The inner Membrane that with the *Chorion* surrounds the Waters and Child.

Anus, The Fundament.

Chorion, The Membrane that surrounds the *Amnios*.

Coccyx, The Rump-Bone.

Embryo, The Child from Conception to the third Month.

Fallopian Tubes, The Canals that go from the Womb to the *Ovary*, call'd the *Trumpets*.

Fœtus, The Child from the third to the ninth Month.

Funis Umbilicalis, The Navel-String.

Ilium, The Haunch-Bone.

Iscbium, The Hip-Bone.

Ligamenta lata rotunda, The broad and round Ligaments.

Meatus Urinarius, The Passage for the Urine.

Os inominatum.

Os sacrum, The Bone that forms the back Part of the *Pelvis*.

Os Tince or *Uteri*, The external Mouth of the Womb.

Ova, The Eggs.

Ovarium, The *Ovary*.

Pelvis, The Basin.

Placenta, The After-birth or Cake.

Pregnancy, Being with Child.

Pubis, The Share-Bone.

Rectum, The Straight Gut.

Uterus, The Womb.

Vagina, The Sheath, or Entry to the Womb.

F I N I S.





